

**IN THE UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK**

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In re:)
LEHMAN BROTHERS HOLDINGS, INC.) Chapter 11
Debtor.) Case No. 08-13555 (JMP)
----- x

**NOTICE OF PARTIAL TRANSFER OF CLAIM
PURSUANT TO FRBP RULE 3001(e)(2)**

1. TO: **ALLIANZ BANK FINANCIAL ADVISOR SPA ("Transferor")**
Piazzale Lodi, 3
Milano, 20137
Italy
Attn Franco Brichetti – Francesca Trebbi

2. Please take notice of the transfer of an undivided interest in the amount of USD 21,911.16 (EUR 15,000.00), of your claim against LEHMAN BROTHERS HOLDINGS INC. Case No. 08-13555 (JMP) in the above-referenced consolidated proceedings, arising from and relating to the guaranty of certain underlying securities described in Claim No. 48753 (attached as Exhibit A hereto), to:

BANCA POPOLARE DI SONDRIO S.c.p.A. ("Transferee")
Servizio Finanza – Amministrazione Titoli
Piazza Garibaldi, 16
Sondrio, 23100
Italy
Attn Gerry De Alberti

An evidence of transfer of claim (including details as to the underlying securities) is attached hereto as Exhibit B. All notices regarding the transferred portion of the claim should be sent to the Transferee as the address attached in Exhibit C.

3. No action is required if you do not object to the transfer of your claim. However, **IF YOU OBJECT TO THE TRANSFER OF YOUR CLAIM, WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, YOU MUST:**

■ **FILE A WRITTEN OBJECTION TO THE TRANSFER with:**

United States Bankruptcy Court
Southern District of New York
Attn: Clerk of Court
Alexander Hamilton Custom House
One Bowling Green
New York, NY 10004-1408

■ **SEND A COPY OF YOUR OBJECTION TO THE TRANSFEREE.**

- Refer to **INTERNAL CONTROL NO.** _____ in your objection and any further correspondence related to this transfer.

4. If you file an objection, a hearing will be scheduled. **IF YOUR OBJECTION IS NOT TIMELY FILED, THE TRANSFEREE WILL BE SUBSTITUTED FOR THE TRANSFEROR ON OUR RECORDS AS A CLAIMANT IN THIS PROCEEDING WITH RESPECT TO THE TRANSFERRED PORTION.**

CLERK

FOR CLERK'S OFFICE USE ONLY:

This notice was mailed to the first named party, by first class mail, postage prepaid on _____, 2011.

INTERNAL CONTROL NO. _____

Copy: (check) Claims Agent _____ Transferee _____ Debtor's Attorney _____

Deputy Clerk

IN THE UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK

Form 210A

United States Bankruptcy Court

SOUTHERN DISTRICT OF NEW YORK

In re LEHMAN BROTHERS HOLDINGS INC., et. al., DEBTORS

Case No. 08-13555 (JMP)
JOINTLY ADMINISTERED

TRANSFER OF CLAIM OTHER THAN FOR SECURITY

A CLAIM HAS BEEN FILED IN THIS CASE or deemed filed under 11 U.S.C. § 1111(a).
Transferee hereby gives evidence and notice pursuant to Rule 300 1(e)(2), Fed. R. Bankr. P., of the
transfer, other than for security, of the claim referenced in this evidence and notice.

Banca Popolare di Sondrio
Name of Transferee

Allianz Bank Financial Advisors SpA
Name of Transferor

Name and Address where notices to transferee
should be sent:

Banca Popolare di Sondrio
Piazza Garibaldi, 16
Sondrio, Italy 23100

Court Claim: 48753
Total Amount of Claim: \$ 940,291.62
Date Claim Filed: 27.10.2009
Allowed Claim \$ 931,954.58
Partial Claim Transferred: \$ 21,911.16

Attn: Gerry De Alberti
E-mail: gerry.dealberti@popso.it
Phone: 0039 0342 528927
Last Four Digits of Acct #: N/A

Piazzale Lodi, 3
Milano Italy 20137

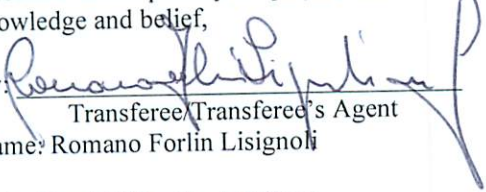
Attn: Franco Brichetti
Francesca Trebbi
Phone: +39 02 72168604 - 8922
Last Four Digits of Acct. #: N/A

Name and Address where transferee payments
should be sent (if different from above):

Attn:
Phone:

Last Four Digits of Acct #: N/A

I declare under penalty of perjury that the information provided in this notice is true and correct to the best of my
knowledge and belief,

By: 
Transferee/Transferee's Agent
Name: Romano Forlin Lisignoli

Date: 15th day of May 2014

Title: Head Office Bank Officer

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both 18 U.S.C.
§1152 & 3571.

EVIDENCE OF TRANSFER OF CLAIM

TRANSFER AGREEMENT

United States Bankruptcy Court/Southern District of New York

Lehman Brothers Holdings Claims Processing Center
c/o Epiq Bankruptcy Solutions, LLC
FDR Station, P.O. Box 5076
New York, NY 10150-5076

In Re:
Lehman Brothers Holdings Inc., et al.,
Debtors.

Chapter 11
Case No. 08-13555 (JMP)
(Jointly Administered)

**LEHMAN SECURITIES PROGRAMS
PROOF OF CLAIM**

Filed: USBC - Southern District of New York
Lehman Brothers Holdings Inc., Et Al.
08-13555 (JMP) 0000048753



Note: This form may not be used to file claims other than those based on Lehman Programs Securities as listed on <http://www.lehman-docket.com> as of July 17, 2009

Name and address of Creditor: (and name and address where notices should be sent if different from Creditor)

ALLIANZ BANK FINANCIAL ADVISORS S.P.A.
PIAZZALE LODI, 3
20137 MILANO (MI) ITALIA

☐ Check this box to indicate that this claim amends a previously filed claim.

Court Claim Number: _____
(If known)

Filed on: _____

Telephone number: 0039 02 7216 8778 Email Address: legal_advice@allianzbank.it

Name and address where payment should be sent (if different from above)

☐ Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

Telephone number: Email Address:

1. Provide the total amount of your claim based on Lehman Programs Securities. Your claim amount must be the amount owed under your Lehman Programs Securities as of September 15, 2008, whether you owned the Lehman Programs Securities on September 15, 2008 or acquired them thereafter, and whether such claim matured or became fixed or liquidated before or after September 15, 2008. The claim amount must be stated in United States dollars, using the exchange rate as applicable on September 15, 2008. If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the claim amounts for each Lehman Programs Security to which this claim relates.

Amount of Claim: \$USD 940,291.62 (Required) - see annex attached -

☒ Check this box if the amount of claim includes interest or other charges in addition to the principal amount due on the Lehman Programs Securities.

2. Provide the International Securities Identification Number (ISIN) for each Lehman Programs Security to which this claim relates. If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the ISINs for the Lehman Programs Securities to which this claim relates.

International Securities Identification Number (ISIN): XS0200284247 (Required)

3. Provide the Clearstream Bank Blocking Number, a Euroclear Bank Electronic Reference Number, or other depository blocking reference number, as appropriate (each, a "Blocking Number") for each Lehman Programs Security for which you are filing a claim. You must acquire a Blocking Number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the Blocking Numbers for each Lehman Programs Security to which this claim relates.

Clearstream Bank Blocking Number, Euroclear Bank Electronic Instruction Reference Number and or other depository blocking reference number:

Clearstream Bank CA34709 (Required)

4. Provide the Clearstream Bank, Euroclear Bank or other depository participant account number related to your Lehman Programs Securities for which you are filing this claim. You must acquire the relevant Clearstream Bank, Euroclear Bank or other depository participant account number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). Beneficial holders should not provide their personal account numbers.

Accountholders Euroclear Bank, Clearstream Bank or Other Depository Participant Account Number:

Clearstream Bank Account 57282 (Required)

5. Consent to Euroclear Bank, Clearstream Bank or Other Depository: By filing this claim, you consent to, and are deemed to have authorized, Euroclear Bank, Clearstream Bank or other depository to disclose your identity and holdings of Lehman Programs Securities to the Debtors for the purpose of reconciling claims and distributions.

Date:

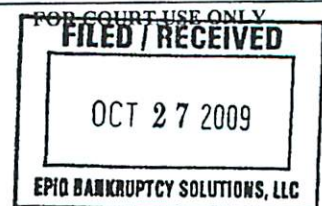
10/23/2009

Signature:

Mr. Davide Spreafico - Manager

Mr. Lorenzo Ceresa - Manager

ALLIANZ BANK
FINANCIAL ADVISORS S.p.A.



Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

to the LPS POC filed by Allianzbank Financial Advisors Spa - Notes held on clients' account

JT: Clearstream Bank account 57282

	Issue currency	change at 09/15/2008 (*)	Principal amount in Eur	Principal amount converted in USD as on the exchange on 09/15/2008	Interest accrued as of 09/15/2008 (excluded) in Eur	Interest accrued as of 09/15/2008 (excluded) converted in USD	Interest rate	Interest accrued from 09/15/2008 up to 11/02/2009 in Eur	Interest accrued from 09/15/2008 up to 11/02/2009 converted in USD	Amount of the claim in Eur	Amount of the claim in USD	Clearing system blocking number
84247	EUR	1.431	638,000.00	912,978.00	19,087.08	27,313.62	2.99170590	-	-	657,087.08	940,291.62	CA34709

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er fees, expenses and costs (yet to be determined), in each case, to the fullest extent allowed by the Court, the Bankruptcy Code and any applicable laws

Allianz Bank
Financial Advisors Spa

Spresafico - Manager
Ceresa - Manager

Schedule I

Transferred Claims

Purchased Claim

3.125% of XS0200284247= \$ 21,911.16 of \$ 701,157.05 (the outstanding allowed amount of XS0200284247 as described in the Proof of Claim dated 10/23/09 and filed on 10/27/09)


Lehman Programs Securities to which Transfer Relates

Description of Security	ISIN/CUSIP	Issuer	Guarantor	Principal/Notional Amount	Maturity	Accrued Amount (as of Proof of Claim Filing Date)
Lehman Tsy FRN 22/09/2014	XS0200284247	Lehman Brothers Treasury Co. B.V.	Lehman Brothers Holdings Inc.	EUR 15,000.00	22/09/2014	USD 21,911.16

ALLIANZ BANK FINANCIAL ADVISORS SpA

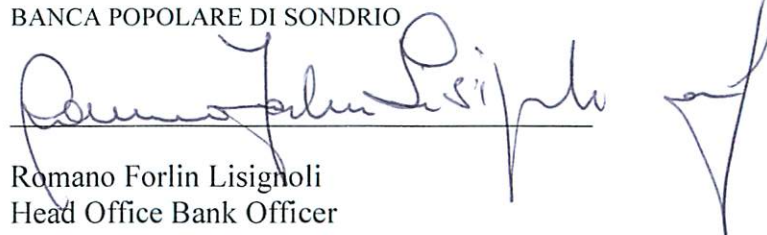


Bruno Casalini
Manager



Franco Brichetti
Managing Officer

BANCA POPOLARE DI SONDRIO



Romano Forlin Lisignoli
Head Office Bank Officer

Exhibit C

Address for Notices:

BANCA POPOLARE DI SONDRIO S.c.p.A.
Piazza Garibaldi, 16
Sondrio, 23100
Italy

Attn: Gerry De Alberti – Servizio Finanza / Amministrazione Titoli

UNITED STATES BANKRUPTCY COURT
Southern District of New York
Attn : Clerk of Court
Alexander Hamilton Custom House
One Bowling Green
New York, NY 10004-1408